FORM®

SECURITIES AN Wash 4 2007

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3235-007 Expires: March 30, 2008 Estimated	L
07040413	-
07040413	
	Serial
DATE RECEIVE	D

Name of Offering (check if this is an ar	mendment and name has changed	and indicate change	<u> </u>		.		
Membership Units of IN-vivo, LLC	mendment and hame has changed.	, and mulcate change	•/				
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	➤ Rule 506	☐ Section	4(6)		
Type of Filing:	Kale 304	_	E Rule 500	☐ Amendme	• •		
Type of Fining.				Antelione			
		IDENTIFICATION	DATA				
Enter the information requested about	t the issuer						
Name of Issuer (check if this is an ame	ndment and name has changed, ar	nd indicate change.)					
lN-vivo, LLC							
Address of Executive Offices	(Number and Stree	et, City, State, Zip Co	de) Telephone Nu	mber (Including	accessed		
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including PROCESSED) 3000 Kent Avenue, West Lafayette, IN 47906 (765) 775-1004 x 102							
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Z	Telephone Nu	Telephone Number (Including Area Code) JAN 1 2 2007				
Brief Description of Business Venture capital investments			·		THOMSON FINANCIAL		
Type of Business Organization			<u></u> -				
□ corporation	☐ limited partnership, already for	formed	🗷 other (please specify): Lin	nited Liability Company		
☐ business trust	☐ limited partnership, to be form	med			• • •		
Actual or Estimated Date of Incorporation	or Organization:	Month 10	Year 06				
·	J		•	■ Actual	☐ Estimated		
Jurisdiction of Incorporation or Organization	•						
	CN for Canada; FN for oth	her toreign jurisdictio	n)		IN		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
- · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	■ Managing Member					
Full Name (Last name first, if individual) IN-vivo Ventures, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Kent Avenue, West Lafayette, IN 47906										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager of Managing Member					
	name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Kent Avenue, West Lafayette, IN 47906										
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager of Managing Member					
Davis, Eric	name first, if individual)									
3000 Kent Aven	dence Address (Number and Sue, West Lafayette, IN 47906									
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Levinsohn, John										
12216 Redgold	dence Address (Number and S Run, Carmel, IN 46032		·							
Check Boxes that Apply:	Promoter	■ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Sweet, George										
1100 West 131st	dence Address (Number and S Street, Carmel, IN 46032									
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
	name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
	name first, if individual)									
Business or Resi	dence Address (Number and S	Street, City, State, Zip Code)								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last	name first, if individual)									
Business or Resi	dence Address (Number and S	treet, City, State, Zip Code)								
			-							

						1.11 011.11	TION ABO	, o i o i i b					
1.	Has the issuer	r sold, or doe	es the issuer	intend to so				_	under ULOE.			Yes No	<u>X</u>
2.	What is the m	ninimum inv	estment tha	t will be acc	epted fron	n any individ	ual?					s	л/ a
3.	3. Does the offering permit joint ownership of a single unit?									·			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
N/A													
Full	Name (Last na	ame first, if i	ndividual)	-		· · · · · · · · · · · · · · · · · · ·							
Busi	ness or Reside	nce Address	(Number a	and Street, C	ity, State,	Zip Code)							
				,	, ,								
Nan	ne of Associated	d Broker or	Dealer						***************************************		- <u>-</u>		
State	es in Which Per	erson Listed	Has Solicite	d or Intends	to Solicit	Purchasers		·			····-		
(Che	ck "All States"	" or check in	ndividual St	ates)									All States
[AL	[A	AKJ	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[1]	NI	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMT] [N	NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[ОН]	(OK)	[OR]	[PA]
{RI]		SCI	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last na	ame first, if i	ndividual)										
Busi	ness or Resider	ence Address	(Number a	nd Street, C	ity, State,	Zip Code)						· ·	
Nan	ne of Associated	d Broker or	Dealer								<u>.</u>		
State	s in Which Per	rson Listed I	Has Solicite	d or Intends	to Solicit	Purchasers				 .			
(Che	ck "All States"	" or check in	ndividual St	ates)		• • • • • • • • • • • • • • • • • • • •				******************		••••••	All States
[AL]	[A	AKJ	[AZ	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]			[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] IN	NE	[NV]	[NH]	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]	jok]	(OR)	[PA]
[Ri]	រុន	SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nam	e of Associated	d Broker or	Dealer	<u> </u>			-	<u> </u>	<u> </u>				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
[AL]	[A	ΛKĮ	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	11]	NJ	Į[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
ĮМТ] IN	NE	[NV]	[NH]	[NJ]	INMI	[NY]	[NC]	[ND]	ЮН	[OK]	[OR]	[PA]
[RI]	IS	C]	[SD]	[TN]	[TX]	נעדן	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity Common Preferred Convertible Securities (including warrants).... Partnership Interests..... Other (Specify Membership Interests) 1,000,000.00 500,000.00 Total 1,000,000.00 500,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors \$__ 500,000.00 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505 Regulation A..... Rule 504..... Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees × 16,000.00 Accounting Fees Engineering Fees.... Sales Commissions (specify finders' fees separately) Other Expenses (Identify) blue sky filing fees

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

X

16.000.00

Total

C. OFFERING PRICE, NUMBER OF IN	VESTORS, EXPENSES AND	USE OF PROCEEDS						
b. Enter the difference between the aggregate offering price given in response to Part C – Question 4.a. This difference is the "adjusted	\$	984,000.00						
5. Indicate below the amount of the adjusted gross proceeds to the issuer us If the amount for any purpose is not known, furnish an estimate and cl payments listed must equal the adjusted gross proceeds to the issuer set for								
		Payment to Officers, Directors, & Affiliates		Payment To Others				
Salaries and fees		□ \$	□ s					
Purchase of real estate		□ s						
Purchase, rental or leasing and installation of machinery and equipment		□ s						
Construction or leasing of plant buildings and facilities		\$						
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger).	□ s							
Repayment of indebtedness		□ s						
Working capital	× \$_	984,000.00						
Other (specify):								
		□ s						
Column Totals		□ s						
Total Payments Listed (column totals added)		□ \$ ⋉ \$						
Total Layristic Electric Country acceptance		E 3	984,000	. 00 .				
			:	·				
D. FEDERAL SIGNATURE								
The issuer had duly caused this notice to be signed by the undersigned duly at an undertaking by the issuer to furnish to the U.S. Securities and Exchange C non-accredited investor pursuant to paragraph (b)(2) of Rule 502.								
Issuer (Print or Type) IN-vivo, LLC, by IN-vivo Ventures, LLC, its Managing Member	Signature & Management		Date Decemb	per 18, 2006				
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
Eric Davis	Manager							

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)